Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000087647 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FILE IT USA INC. Account Number : I20190000121 Phone : (718)925-2025

Fax Number : (718)925-2027

52

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:__

Service@fileitusa.com

FLORIDA PROFIT/NON PROFIT CORPORATION

StandforProperties LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu

Help

03/05/2024 (((H2400	15:52 0087647 3)))	From:17189252027 To:18	506176381 Dai	te Time	03/05/24	03:52PM	Pages: 3	P: 2/3
	АКП	CLES OF ORGANIZATION FOR (TORIDALIMITE	DLIABILT	Y COMPANY			
ARTICLE The name of		Liability Company is:						
	StandforProj	perties LLC						
		ust conatin the words "Limited I	.iability Company	. "L.L.C.," c	or "LLC.")			
	H - Address g address and	: street address of the principal o	fice of the Limite	d Liability (Company is:			
		Principal Office Address:			Mailing Add	ress:		
	618 Orange Drive Apt #210			8 Orange Dr	ive Apt#210			
	Altamonte S	prings, Fl. 32701	Ali	amonte Spr	ings, FL 3270	I.		
another bu	siness entity	ompany cannot serve as its own with an active Florida registration a street address of the registered	n.)	1 ou must c	esignate an n	idivkiuaj or		
		Kevyn Aponte	XI.					
			Name					
		618 Orange Drive Ap						
		Florida street address	(P.O. Box <u>NOT</u> :	acceptable)				
		Altamonte Springs	FL		2701			
		City	State	Z	ip			
place design further agree	ated in this ce to comply wi	istered agent and to accept service rificate. I hereby accept the appoint the provisions of all statutes report the obligations of my position a	intment as registe lating to the prope	red agent an r and compl	d agree to act etc performan	in this capa	city. I	
		/s/	"Қақт Яроте					
		Registe	red Agent's Signa	ture (REQU	TRED)			

(CONTINUED)

03/05/2024 15:52 From:17189252027 To:18506176381 Date Time 03/05/24 03:52PM Pages: 3 P: 3/3

(((H24000087647 3)))

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
AMBR	K 4	
	Kevyn Aponte 618 Orange Drive Apt ±210 Altamonte Springs, FL 32701	
	Altamonte Springs, FL 32701	
		
		-
Use attachment if necessary)		
he date inserted in this block does not n	ecific and cannot be more than five business days prior	
he date inserted in this block does not n tent's effective date on the Department (neet the applicable statutory filing requirements, this date	
he date inserted in this block does not n tent's effective date on the Department of VI: Other provisions, if any.	neet the applicable statutory filing requirements, this date of State's records.	will not b
he date inserted in this block does not numer's effective date on the Department (VI: Other provisions, if any.	neet the applicable statutory filing requirements, this date of State's records.	will not b
he date inserted in this block does not numer's effective date on the Department (VI: Other provisions, if any.	neet the applicable statutory filing requirements, this date of State's records.	will not b
thing.) the date inserted in this block does not need a contract of the Department of the Other provisions, if any.	neet the applicable statutory filing requirements, this date of State's records.	will not b
he date inserted in this block does not n ient's effective date on the Department of VI: Other provisions, if any.	neet the applicable statutory filing requirements, this date of State's records.	will not b
he date inserted in this block does not need's effective date on the Department of VI: Other provisions, if any. EOURED SIGNATURE: /s/ Kreyn.2	neet the applicable statutory filing requirements, this date of State's records. Aponte mber or an authorized representative of a member	will not b
he date inserted in this block does not need's effective date on the Department of VI: Other provisions, if any. EQUIRED SIGNATURE: Solution Signature of a mee	Aponte mber or an authorized representative of a member. ed in accordance with section 605,0203 (11(b)) Florida S	will not b
he date inserted in this block does not next's effective date on the Department of VI: Other provisions, if any. EQUIRED SIGNATURE: /s/ Kreyn.: Signature of a menual distribution of the provisions of the pro	Aponte The applicable statutory filing requirements, this date of State's records. Aponte The applicable statutory filing requirements, this date of State's records.	will not b
Hong.) the date inserted in this block does not ment's effective date on the Department of VI: Other provisions, if any. EQUIRED SIGNATURE: /s/ Kown.) Signature of a ment is executed I am aware that any false constitutes a third degree	Aponte mber or an authorized representative of a member. ed in accordance with section 605,0203 (11(b)) Florida S	will not b
he date inserted in this block does not next's effective date on the Department of VI: Other provisions, if any. EQUIRED SIGNATURE: /s/ Kreyn.: Signature of a menual distribution of the provisions of the pro	Aponte The applicable statutory filing requirements, this date of State's records. Aponte The applicable statutory filing requirements, this date of State's records. Aponte The applicable statutory filing requirements and the application of State's records. The applicable statutory filing requirements and the application of State's records.	will not b
Hong.) the date inserted in this block does not ment's effective date on the Department of VI: Other provisions, if any. EQUIRED SIGNATURE: /s/ Kown.) Signature of a ment is executed I am aware that any false constitutes a third degree	Aponte Aponte Typed or printed name of signce	tatutes.
Hongs, the date inserted in this block does not nent's effective date on the Department of VI: Other provisions, if any. FOURED SIGNATURE: /s/ Equyn. Signature of a met This document is executed a maware that any false constitutes a third degree Kevyn Aponte	Aponte Aponte Typed or printed name of signee Filing Fees:	tatutes.
he date inserted in this block does not nent's effective date on the Department of VI: Other provisions, if any. EQUIRED SIGNATURE: St. Regn.; Signature of a ment is executed a manual any false constitutes a third degree Kevyn Aponte S125.00 Filing Fee for Articles of Org	Aponte Aponte Typed or printed name of signce	tatutes.
Hongs, the date inserted in this block does not nent's effective date on the Department of VI: Other provisions, if any. FOURED SIGNATURE: Signature of a ment is executed a may a department is executed a may false constitutes a third degree Kevyn Aponte S125.00 Filing Fee for Articles of Org S 30.00 Certified Copy (Optional)	Aponte Aponte Typed or printed name of signee Filing Fees: anization and Designation of Registered Agent	will not b
Hongs, the date inserted in this block does not nent's effective date on the Department of VI: Other provisions, if any. FOURED SIGNATURE: Sold Regard Signature of a ment of the document is executed a may are that any false constitutes a third degree Kevyn Aponte	Aponte Aponte Typed or printed name of signee Filing Fees: anization and Designation of Registered Agent	tatutes.
Hongs, the date inserted in this block does not nent's effective date on the Department of VI: Other provisions, if any. FOURED SIGNATURE: Sold Regard Signature of a ment of the document is executed a may are that any false constitutes a third degree Kevyn Aponte	Aponte Aponte Typed or printed name of signee Filing Fees: anization and Designation of Registered Agent	tatutes.
Hongs, the date inserted in this block does not need a effective date on the Department of VI: Other provisions, if any. EQUIRED SIGNATURE: Solution Signature of a ment of the document is executed an aware that any false constitutes a third degree	Aponte Aponte Typed or printed name of signee Filing Fees: anization and Designation of Registered Agent	tatutes.
Hongs, the date inserted in this block does not nent's effective date on the Department of VI: Other provisions, if any. FOURED SIGNATURE: Sold Regard Signature of a ment of the document is executed a may are that any false constitutes a third degree Kevyn Aponte	Aponte Aponte Typed or printed name of signee Filing Fees: anization and Designation of Registered Agent	tatutes.
Signature of a men This document is executed a may aware that any false constitutes a third degree Kevyn Aponte 125.00 Filing Fee for Articles of Org 30.00 Certified Copy (Optional)	Aponte Aponte Typed or printed name of signee Filing Fees: anization and Designation of Registered Agent	latines.